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## INFORMATIONAL NOTICE

**DATE:** May 4, 2007

**TO:** Participating Community Mental Health (CMH) Providers

**RE:** Removal of Prior Approval Requirement – Error Code R09

The purpose of this notice is to inform community mental health providers who are not SASS providers that effective immediately, claims for services rendered to recipients enrolled in the Screening, Assessment and Support Services (SASS) program will no longer be rejected for prior approval required (error code R09).

Note that SASS providers are required to continue requesting prior approvals for transfers between SASS providers. The Crisis And Referral Entry Service (CARES) will remain the single point of entry into the SASS system - CARES **must** be contacted for a recipient to be enrolled into the SASS program and when a recipient is being transferred from one SASS provider to another SASS provider.

**Reminder:** All community mental health providers seeking reimbursement for services provided to recipients during an active SASS eligibility period must submit their claims to HFS for processing. Providers may submit claims electronically or in hard copy paper. For paper claim instructions, refer to CMH-200, Handbook for Providers of SASS Services on the Web site at: <a href="http://www.hfs.illinois.gov/handbooks/chapter200/">http://www.hfs.illinois.gov/handbooks/chapter200/</a> For electronic claim submission, refer to Medical Electronic Data Interchange (MEDI)/Internet Electronic Claims (IEC) at <a href="http://www.myhfs.illinois.gov/">http://www.myhfs.illinois.gov/</a>

Your participation in our programs is greatly appreciated. Questions regarding this notice may be directed to the Bureau of Comprehensive Health Services at 1-877-782-5565.

Theresa A. Eagleson, Administrator Division of Medical Programs

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